ţ:

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT	2.a. NAME OF CANDIDATE OF	ROMMITTEE			
7-21-10	Kalen	Tareo	·,)		
2.b. IF COMMITTEE, NAME OF CANDIDATE	· · · · · · · · · · · · · · · · · · ·	المام من الم	3. ELECTION D	ATE	··
			Buch	500	2010
4.a. CAMPAIGN ADDRESS AND PHONE			· · · · · ·	- U	4423
Street or Rural Route	City On 1 - 1 - 0 On	State	Zip Code	Phone	2.4102
4.b. CANDIDATE'S HOME ADDRESS (if differen	Soltewan Ro	HURK	wan 70	57541	344434
Street or Rural Route	City	State	Zip Code	Phone	9
5. QFFICE SOUGHT (include district number, i	f applicable) 6. NAM	E OF POLITICAL	TREASURER (ma	y be candidate	2)
District 9 Scho	01 Board 7,	abitm.	Faceou	J	
7. CATEGORY OR REPORT (Check one)				-	
THE SECOND THIRD	LJ (254) FOURTH PRE-	∐ PRE-	L.I MID-YEAF	R YEA	LJ AR-END
QUARTER QUARTER QUARTER 8.a. BEGINNING DATE OF REPORTING PERIOD		GENERAL NG DATE OF REPO	SUPPLEMEN	ITAL SUPP	EMENTAL.
2-18-10	3 0.0. END	7-26-			
9. (Check one)		100	<i></i>		
, ,	ad alleadan inches	GtP			
 This campaign is exempt from detaile tures total \$1,000 or less for this report 	orting period. (Complete items 1	ons (including in-k 2d., 12e. and 12f.	ind) received total)	\$1,000 or less	AND expendi-
b. This campaign is required to file a de	tailed financial disclosure becau	se contributions (i	inoluding in kind) e	nachicad tatal	th 54 000
and/or expenditures total more than \$	\$1,000 for this reporting period.	e controllons (i	moldang mekna) n	eceived iolai m	ore than \$1,000
10. I/we do solemnly swear or affirm that the in	nformation contained in this carr	paign financial di	sclosure report is	true and that ti	nis report is an
accurate accounting of campaign contributi- Financial Disclosure Act. Additionally, I/we	ons and expenditures required to swear or affirm that no campaid) be reported by the n contributions ha	he candidate comm	nittee by the C	ampaign
benefit of the candidate or for any other not	rpolitical purpose as defined by	he federal interna	al revenue code.	ior the person	iai iii iai iciai
Nous lour	7.78.0	Jal:11	a T- aa	_	
signature of candidate	121-10	[ADIEN	A FARRI	<u> </u>	<u>7-29-10 </u>
/ signature or candidate	date	signature	of political treasure	er.	date
11. WITNESS SIGNATURE					
\sim 1					
Charlette Mullis-Morg	ne 7/29/10	Charlett	to Mulling	hours	7/20/10
signature of witness	date	signa	ature of witness		date
			·-··	·	
12. SUMMARY			,		ļ
a. BALANCE ON HAND LAST REPORT			s		j
b. TOTAL RECEIPTS THIS PERIOD			\$		
c. TOTAL DISBURSEMENTS THIS PERIOD			\$		
d. BALANCE ON HAND (12.a. plus 12.b. i	minus 12.c.)			\$ (
					- · (a)
e. TOTAL LOANS OUTSTANDING		·······		s <u>X</u> 10	000
·	- 185 € H4 62	SOID AND		11	
		_			
f. TOTAL OBLIGATIONS OUTSTANDING	יפי ואירוראייציילון ליקול ווייייייייייייייייייייייייייייייי	A-X		s ——	



SS-1109 (Rev. 2/06)

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SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVERING THE PERIOD
Horen tamew	FROM: 2-18-10 TO: 7-21-10
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)	
a. Uniternized Contributions (\$100 or less from each source this period)	
b. Itemized Contributions (over \$100 from each source this period)	\$ <u>300°40</u>
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.).	263 -
16. LOANS RECEIVED THIS REPORTING PERIOD	<u> 4220.00</u>
17. INTEREST RECEIVED THIS REPORTING PERIOD	
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	s <u>5572.00</u>
DISBURSEMENTS	
19. EXPENDITURES (other than loan payments)	
a. Expenditures (\$100 or less each payee this period) (must be listed by category -	e.g., printing, postage, gasoline)
Willie Spurgeon Sons s +, 02	6.00 1,120.91 D 0.00 43.70 D
\$ <u>4</u>	0.60 43.70 G
" 11 11 \$ 510	100 557.18 B
\$ <u>408</u>	300 445.74 B
).00 185,73 Ø
s <u>27</u>	14.22
\$3	38.68
\$ 4	32.00
s <u></u> 3	12.46
	301610
Total of Expenditures (\$100 or less each payee)	· · · · · · · · · · · · · · · · · · ·
b. Itemized Expenditures (Over \$100 each payee this period)	
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	
20. LOAN REPAYMENTS MADE THIS PERIOD	
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	\$
22.IN-KIND CONTRIBUTIONS	
a. Unitemized in-kind contributions (\$100 or less from each source this period)	\$ 103.67
b. Itemized in-kind contributions (over \$100 from each source this period)	\$
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22	.b.)s <u>103.67</u>
23.OBLIGATIONS	-0
a. Unitemized Obligations Outstanding (\$100 or less each)	\$_2,000 ^{.00}
a. Unitemized Obligations Outstanding (\$100 or less each) b. Itemized Obligations Outstanding (Over \$100 each)	\$
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i ite	em 12.f.) \$ <u>2,000 - 00</u>



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	2. REPORT COVER	
	FROM: 2-18-10	TO: 7-21-10 Amount
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE		
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (c	Contributions totaling more than \$100 from any contributor Contribution Received For:	Amount of Contribution
Tourid + Patay Gamble		
Last Name/Organization Name /	Primary Election General Election	100:00
Address Dot Meadow View Rd	Runoff (Local Elections Only)	
City GEONGE FORM TN State 2 in Code 37336	Date of Contribution	Aggregate This Election
Occupation	2-27-10	
Employer Dus Driver	-	
Ham. Co. School Independent		
First Name Randy or Descree Marian	Contribution Received For:	Amount of Contribution
Last Name/Organization Name	Primary Election General Election	500.00
Address 8410 Folkst Breeze Dr	Runoff (Local Elections Only)	
City Harnson State Zip Good 37341	Date of Contribution	Aggregate This Election
Occupation		
Pous Driver Employen		
Mr. Co. School Indocentat		
First blame Middle Name Tranklin Banther Middle Name	Contribution Received For:	Amount of Contribution
Last Name/Organization Name	Primary Election General Election	100.00
97307 Snow Hill Rd	Runoff (Local Elections Only)	
Oblternh Size Zipcode 37363	Date of Contribution	Aggregate This Election
Occupation Bus Driver	1	
Nam. Co. School Independent		
First Name Middle Name	Contribution Received For:	Amount of Contribution
Last Name/Organization Name	Primary Election General Election	352.00
Address 6605 HIDU 58	☐ Runoff (Local Elections Only)	
City Moltewah Stage Zacode 373	Date of Contribution	Aggregate This Election
Bus Inver		
Employe Nam. Po School Interentent		
5. TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of contributions, this amount must be shown in item 15b, of summary.)		1,052.00

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE 2. REPO					TO: 7-21-10			
					Amount			
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)								
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED IN-KIND CONTRIBUTION (in-kind contributions totaling more than \$100 from any contributor during the period)								
First Name Rhoods Thurman Middle Name Last Name/Organization Name			In-Kind Contribution Receive Primary Election	In-Kind Contribution Received For: Value of In-Kind Contribution				
Last varier diganization radire			Runoff (Local Election	ns Only)	+ postage			
Address		Date of In-Kind Contribution	Aggregate this Election					
City	State Zip Code		Description of In-Kind Contribution Mailed Pos	of cards				
Occupation Employ	y e r		"Marke po	or copies				
First Name	rst Name Middle Name		In-Kind Contribution Receive	Value of In-Kind Contribution				
Last Name/Organization Name	·		☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)					
Address			Date of In-Kind Contribution		Aggregate this Election			
City	State Zip Code			Description of In-Kind Contribution				
Occupation Emplo	yer							
First Name Middle Name		In-Kind Contribution Receive	d For:	Value of In-Kind Contribution				
Last Name/Organization Name		Runoff (Local Election						
Address		Date of In-Kind Contribution	<u></u>	. Aggregate this Election				
City	State Zip Code		Description of In-Kind Contribution					
Occupation Employer								
First Name	irst Name Middle Name		In-Kind Contribution Receive		Value of In-Kind Contribution			
Last Name/Organization Name		Primary Election Runoff (Local Election	General Election					
Address			Date of In-Kind Contribution		Aggregate this Election			
City State Zip Code		Description of In-Kind Contribution						
Occupation Emplo	yer							
First Name	Middle Na	me	In-Kind Contribution Receiv		Value of In-Kind Contribution			
Last Name/Organization Name		Primary Election	General Election					
Address		Date of In-Kind Contribution		Aggregate this Election				
City	State	Zip Code	Description of In-Kind Contribution					
Occupation Employ	er		1					
5. TOTAL ITEMIZED IN-KIND CONTRIBUTION (Carry forward to item 3. of next page if additional page of in-kind contributions, this	pages of this form		ry.)					

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME/OF CANDIDATE OR COMMITTEE 2. REPORT COV					TO: 7-21-10		
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 3715.62		
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)							
Willre Spurgen	Ultrice - burgaron				Amount of Expenditure		
Last Name/Business Name! 3 SISAS			97713		3715.62		
Address Sylv Rd			Eggns (yard)				
City CollEuch	State 7H	3956J	-				
First Name TKOO	ne	Purpose of Expenditure	Amount of Expenditure				
Last Name/Business Name 400 Yalmetto St	``	- 	Business	Cards	*12.00		
Address Chattanooga Ti	1 -	1403					
City	State	Zip Code					
First Name	First Name Middle Name				Amount of Expenditure		
Last Name/Business Name	- 	.					
Address							
City	State	Zip Code	+				
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name			1				
Address			1				
City	State	Zip Code	_				
First Name	Middle Nari		Purpose of Expenditure		Amount of Euponditure		
Last Name/Business Name	Middle Hall		- Lapose of Expenditure		Amount of Expenditure		
East Hairigh Dodniess Heire							
Address							
City	State	Zip Code			5 -		
First Name	Middle Nar	ne	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name							
Address							
City	State	Zip Code					
TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional page	s of this form	are used)			3727.62		
(If this is the last page of expenditures, this amount must be shown in item 19b. of summary.)					2101.65		

SS-1129 (Rev. 4/02)

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAMB OF CANDIDATE OR COMMITTEE						2. REPORT COVERING THE PERIOD			
Haren Farrow					FR	3-21-10 7-21-10			
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (loans totaling more than \$100 from any source during the period)									
Complete the Following for the Source of the Loan									
FirstName Middle Nam	ne		Outstanding L (Beginning o		Loans Receive		oan ments		anding Loan Balance (End of Period)
								Ge addit	
Address Address		21	Loan Receive				Date of Loar		טטטןוי
6251 HARRISON - Golte		U	☐ Primary	Election	General	Election	0.1	M .11	h
City College Zip Code Zip Code Runoff (Local Elections Only)						J			
List All Endor	sers or Guara	entors f	or Above Loa	n (If more spa	ice is needer	d please attach	a page)		
First Name	Middle Name	+		First Name				Middle	Name
Last Name/Organization Name				Last Name/Or	ganization Nar	ne			*
Address				Address					
City	State	Zip C	ode	City	•••			State	Zip Code
Amount Guaranteed Outstanding	mount Guaranteed Outstanding			Amount Guaranteed Outstanding					
First Name	First Name Middle Name			First Name Middle Name					
Last Name/Organization Name			Last Name/Organization Name						
Address			Address						
City	State	Zip C	ode	City State Zip			Zip Code		
Amount Guaranteed Outstanding		•		Amount Guara	nteed Outstan	ding		⊥ ,	_
First Name	Middle Name)		First Name				Middle	Name
Last Name/Organization Name	<u>.' </u>			Last Name/Or	ganization Nar	ne		1	· ·
Address				Address					
City	State	Zip C	ode	City				State	Zip Code
Amount Guaranteed Outstanding		1		Amount Guara	Inteed Outstan	ding		L	
First Name	Middle Name)		First Name				Middle	Name
Last Name/Organization Name	1			Last Name/Or	ganization Nar	ne		<u> </u>	
Address		Address							
City	State	Zip Ç	ode	City		7'	,	State	Zip Code
Amount Guaranteed Outstanding		1		Amount Guara	inteed Outstan	ding		1	
4. Totals for all Loans (complete on last page of				Outstanding L		Loans	Loa		Outstanding Loan Balance
(Total foans received should also be shown in item 16, on (Total foan payments should also be shown in item 20, on (Total outstanding foan balance should also be shown in item	summary page.)		(Beginning	or Penod)	Received	Paym	ents	(End of Period)